10/562383 EXPRESS MAIL NO.: EV790693810US

#### **APPLICATION DATA SHEET**

# **Application Information**

Application number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	Listing
Number of CD disks::	3
Number of copies of CDs::	2
Sequence submission?::	CD
Computer Readable Form (CRF)?::	Yes
Number of copies of CRF::	1
Title ::	METHODS AND NUCLEIC ACIDS FOR ANALYSES OF COLORECTAL CELL PROLIFERATIVE DISORDERS
Attorney Docket Number::	47675-171
Request for Early Publication?::	
Request for Non-Publication?::	
Suggested Drawing Figure::	
Total Drawing Sheets::	
Small Entity?::	Yes
Petition included?::	
Petition Type::	
Licensed U.S. Gov't Agency::	
Contract or Grant No::	

Secrecy Order in Parent Appl.?:: No

**First Applicant Information** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Cathy

Middle Name::

Family Name:: Lofton-Day

Name Suffix::

City of Residence:: Brier

State or Province of Residence:: WA

Country of Residence:: US

Street of mailing address:: 23908 35<sup>th</sup> Avenue W.

City of mailing address:: Brier

State or Province of mailing address:: WA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 98036

**Second Applicant Information** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Fabian

Middle Name::

Family Name:: Model

Name Suffix::

City of Residence:: Seattle

State or Province of Residence:: WA

Country of Residence:: US

Street of mailing address:: 734 Broadway Avenue E., Apt. 306

City of mailing address:: Seattle

State or Province of mailing address:: WA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 98102

**Third Applicant Information** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Andrew

Middle Name::

Family Name:: Sledziewski

Name Suffix::

City of Residence:: Shoreline

State or Province of Residence:: WA

Country of Residence:: US

Street of mailing address:: 17736 15<sup>th</sup> Avenue NW

City of mailing address:: Shoreline

State or Province of mailing address:: WA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 98177

#### **Fourth Applicant Information**

**Applicant Authority Type::** 

Primary Citizenship Country:: Germany Status:: **Full Capacity** Given Name:: **Tamas** Middle Name:: Family Name:: Rujan Name Suffix:: City of Residence:: Berlin State or Province of Residence:: Country of Residence:: Germany Street of mailing address:: Venetastr. 7 City of mailing address:: Berlin State or Province of mailing address:: Country of mailing address:: Germany D-13189 Postal or Zip Code of mailing address:: Fifth Applicant Information **Applicant Authority Type::** Inventor Primary Citizenship Country:: Germany Status:: **Full Capacity** Given Name:: Jörn Middle Name:: Family Name:: Lewin Name Suffix:: City of Residence:: Berlin State or Province of Residence::

Inventor

Country of Residence:: Germany

Street of mailing address:: Lützowufer 24

City of mailing address:: Berlin

State or Province of mailing address::

Country of mailing address:: Germany

Postal or Zip Code of mailing address:: D-10787

**Sixth Applicant Information** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Germany

Status:: Full Capacity

Given Name:: Jürgen

Middle Name::

Family Name:: Distler

Name Suffix::

City of Residence:: Berlin

State or Province of Residence::

Country of Residence:: Germany

Street of mailing address:: Hewaldstr. 2

City of mailing address:: Berlin

State or Province of mailing address::

Country of mailing address:: Germany

Postal or Zip Code of mailing address:: D-10825

#### **Correspondence Information**

Correspondence Customer Number::	22504
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Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::

Phone number::

Fax Number:

E-Mail address::

### Representative Information

Representative Customer Number::	Representative Customer Number::	22504
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### **Domestic Priority Information**

Application ::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US2004/020336	06/23/04
PCT/US2004/020 336	Non provisional of	10/603,138	06/23/03
PCT/US2004/020 336	Non provisional of	10/602,494	06/23/03
PCT/US2004/020 336	Non provisional of	10/679,062	10/03/03

# Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
Europe	04090072.2	02/27/04	Yes
Europe	04090175.3	05/06/04	Yes

## **Assignee Information**

Assignee name::	Epigenomics AG
Street of mailing address::	Kleine Präsidentenstr. 1
City of mailing address::	Berlin
State or Province of mailing address::	
Country of mailing address::	Germany
Postal or Zip Code of mailing address::	10178

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